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Bib Data Sheet

CONFIRMATION NO. 4874

|  |   |                               |   |                                |                                |
|--|---|-------------------------------|---|--------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/996,661   | <b>FILING DATE</b><br>11/29/2001<br><b>RULE</b>   | <b>CLASS</b><br>370           | <b>GROUP ART UNIT</b><br>2661   | <b>ATTORNEY<br/>DOCKET NO.</b> |                                |
| <b>APPLICANTS</b><br>Emin Martinian, Medford, MA;<br>Carl-Erik W. Sundberg, Chatham, NJ;<br><b>** CONTINUING DATA *****</b> <i>N/A</i> <i>COES</i><br><b>** FOREIGN APPLICATIONS *****</b> <i>N/A</i> <i>COES</i><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 12/17/2001</b>  |   |                               |   |                                |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>COES</i><br>Verified and Acknowledged <i>COES</i><br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>MA | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>32      | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>Nancy R. Gamburd<br>Gamburd & Associates, Ltd.<br>Suite 3300<br>10 South LaSalle Street<br>Chicago, IL 60603-1002  |   |                               |   |                                |                                |
| <b>TITLE</b><br>Apparatus and method for adaptive, multimode decoding  |   |                               |   |                                |                                |
| <b>FILING FEE RECEIVED</b><br>956  | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                |                                |